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**Circular Letter DHCQ – 02-01-421**

To: Chief Executive Officers of Hospitals Providing Cardiac Surgery or Angioplasty

From: Paul Dreyer, Ph.D. Director

Subject: Information Reporting Requirements for Cardiac Surgery and Angioplasty

Date: January 4, 2002

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As you may be aware, the fiscal Year 2001 state budget created a commission whose charge was to recommend criteria for the Department to use in evaluating the care of cardiac surgery and angioplasty patients. The purpose of this letter is to inform hospitals that provide or have been approved to provide cardiac surgery and/or angioplasty services of new data reporting requirements that the Department has developed in response to the commission's recommendations.

The Commission recommended that effective January 1, 2002, all cardiac surgery programs in Massachusetts collect individual patient-level data using the Society of Thoracic Surgeons' (STS) dataset, and join the STS data registry. The Commission recommended similarly that hospitals performing angioplasty collect data using the American College of Cardiology's National Cardiovascular Data Registry (NCDR™) and join the NCDR™ registry as well. These datasets are described in detail at <http://www.sts.org/> (the home page of the Society for Thoracic Surgeons), and <http://www.acc.org/> (the home page of the American College of Cardiology). In addition to these two datasets, the Commission recommended (for surgical patients only) the collection of 30-day all-cause mortality; that is mortality 30 days from the date of the surgery.

Although the regulations that implement these recommendations will not be effective for several months, it is the Department's expectation that hospitals will join the STS and ACC data registries as soon as is feasible, so that cases from January 1, 2002 will be available for reporting when the regulations go into effect.

If you have any questions, please contact Joan Gorga of my staff at (617) 624-5184.